

The “phenomenal expense of empathy”: Caregiving, Relationality and Precarity in Contemporary Fiction

Abhilasha Roy

<https://orcid.org/0009-0000-7636-2612>

RS, University of Delhi

Abstract

This paper will critically engage with literary fiction depicting caregiving to understand how within a postcolonial, neoliberal predicament caring for a loved one becomes a direct exercise in facing one's lived precarity. Engagement with primary texts like Jerry Pinto's *Em and the Big Hoom* (2012) and Mary HK Choi's *Yolk* (2021) will follow a close-reading of discursive elements in the texts which show how caregivers exemplify the precarity of gendered, racialised and working-class subjects in late capitalist societies who are also responsible for another. This (an)other is an ailing subject and doubly exposed and vulnerable to the draining effects of racial and class relations. Discursive analysis will include looking at aspects like moral dilemma exhibited by caregivers, negotiations with acts of giving and receiving care, and contestations with one's own identity in the face of increasingly alienating forces. The ethics of care as a philosophical concept dealing with vulnerability and interdependencies is imperative to any study on precarity. This paper seeks to bring this imperative into the study of literary fiction to develop newer modalities of studying precarity with respect to negotiations with the self and its responsibility towards the other in the process of caring for them.

Keywords: Caregiving, Precarity, Precariousness, Ethics of Care, Relationality

Introduction

Care is one of the most fundamental aspects of human relationships and human society. It is also closely linked to foundational principles of society like justice. The two primary definitions of care are, first, the provisions of what is absolute necessary for sustenance and survival and second, serious consideration or importance given to something or someone. In both the definitions, what comes through prominently is the aspect of ensuring something for someone so that this 'someone' can continue to live. This simple principle of care has had magnanimous impact on ethics, politics, law and society. Ideally, it is easy to imagine a world order based on care wherein everyone's needs are being met equally. However, at this current juncture of neoliberal global capitalism not everyone gets to partake in the shared resources of caring equally. Throughout the world, the sick, elderly, children and underprivileged are disproportionately being deprived of equal access while at the same time also being denied the right to be cared for. This paper takes this as its vantage point to critically engage with literary fiction depicting care-giving to understand how within a postcolonial, neoliberal predicament caring for a loved one becomes a direct exercise in facing one's lived precarity. In order to do so, it draws from erstwhile theoretical work done on the ideas of precariousness, precarity and their relation to ethics of care as a normative

ethical theory encompassing the central idea of relationality. This theoretical framework is then juxtaposed onto the study of the two chosen literary texts to understand how caregivers as gendered, racialised and working-class subjects negotiate with caring or providing care and to what extent they are able to do so. In doing so, this paper also studies how literature acts as an alleviating medium when a failing social order renders caregivers incapable of delivering the care they wish to.

Theoretical underpinnings of precarity, relationality and the ethics of care

This paper's engagement with precarity associated with caregiving subjects and their care-receivers draws from the understanding of precarity as unequal exposure primarily as it has been developed by Judith Butler but also with significant inputs from Guy Standing's conceptualisation of precarity as a class-based condition of a new social class, the precariat. While these remain the theoretical lynchpins of this paper, I also aim to develop an understanding around precarity as it is visualised in literature through the literary techniques of discourse and narrative. Standing's seminal work on precarity in 'the precariat' (2014) formulates the precariat as the social class which is now increasingly replacing the proletariat. This precariat is defined by "so-called 'flexible' labour contracts; temporary jobs; labor as casuals; part-timers, or intermittently for labor brokers or employment agencies" (10). This flexible nature of employment has meant diminishing employment-related benefits like medical insurance generating a larger sense of anxiety, alienation, and anger amongst this new class. Standing further divides this class into three groups based on their reactions to the conditions of precarity that they now face. Amongst these the second and third groups, that is, migrants and ethnic minorities and the educated progressives will be the groups that concern this paper and its engagement with Standing's formulation. The caregivers, and to some extent their care-receivers, being studied in this paper find themselves increasingly assimilating into these categories because of class or race or both at times. However, these are not the only registers through which these protagonists come face to face with their precarious existence. In order to understand their condition and its effect on their caregiving and relation with caregivers this paper also borrows Judith Butler's formulation of precarity.

Butler in *Precarious Life* (2004) situates discourse at the heart of a non-violent ethics. They take on Levinas' idea of the face of the other and develop a theory of precariousness. The meaning of this precariousness is located in one's face to face interaction with the other. This other "bespeaks an agony, an injurability, at the same time that is bespeaks a divine prohibition against killing" (135). In this constant tension between registering and acknowledging the other's vulnerability and inhibiting the instinct for obliteration discourse comes into play and the necessary conditions for language are set up. This is the language that communicates precariousness. This formulation of precariousness is developed on further by Butler in her later work *Frames of War* (2009) wherein they link the "existential conception of precariousness [...] with (the) specifically political notion of precarity" (3). This is simply the idea that precariousness is a social condition wherein we all live dependent on others and equally exposed to what Butler calls "non-life" (15). In contrast however, precarity is the unequal exposure of certain lives to non-life or simply put, death. These conditions of heightened threat to certain lives at the cost of certain others are a politically induced condition. It makes sustenance extremely difficult for some while others enjoy the unequal benefits of wealth re-distribution and accumulation. Furthermore, these conditions are generated and operate for only certain chosen minorities based on erstwhile established structures of class, race, gender, caste, and religion. These communities bear the brunt of systems which are deliberately being made to suffer under neoliberalism. The push towards

neoliberal self-determination and open markets is also intrinsically connected to that of the nation-state and its welfare policies for citizens which are increasingly being diminished and handed over to private players who function on a model of maximum profit. This is linked to a discussion on recognizability which challenges erstwhile notions of the frames of recognition. In their earlier discussion on precariousness, Butler, drawing from Levinas, talks about how representation is and must be impossible to truly convey what the human is. This paradoxicality of representation is continued in their understanding of recognizability. The frames of recognition that we are made aware of and practice within our everyday social life, in their very construction, expose what lies outside the frame. They are consistent with the modes of generating induced precarity for certain sections by making them the others who do not fit the criteria. These others are the people and groups who, through coerced legal and political undoing are made to lack the necessary conditions and support for survival. These are the groups who embody precarity as a politically induced ontological condition (Butler).

Increasingly precarious conditions for certain gendered, racialised and economic social groups in addition to dismantling of erstwhile welfare policies under neoliberalism have generated what theorists have variously termed a crisis of care. Simply put, people are becoming increasingly vulnerable to various decaying factors like environmental change, economic deprivation, exposure to toxicity and dismantling of democratic and secular structures. Simultaneously, the social networks which precariousness depends on are also being dismantled by the same forces, so much so that to look after another becomes a mammoth task daily. The caregivers in the texts chosen for study in this paper exemplify the precarity of gendered, racialised and working-class subjects in late capitalist societies who are also responsible for another. This (an)other is an ailing subject and doubly exposed and vulnerable to the draining effects of racial and class relations. While the crisis of care is a socially and politically generated problem, the solution left to caregivers and receivers is entirely personal. The burden to look after and be looked after falls back on the family and those close to one. As Eva Feder Kittay says in her study of precarity and disability, “disabled person and caregiver alike exist in an economic, social, and political order that relegates “inevitable dependencies” to the private domain” (292).

The inevitability of private care and its consequences upon the subjects form a larger part of the crisis of care. The inability to attend to another completely because of one’s own predicament instills a crisis of ethics. While the idea of giving care remains deep rooted in our psyche, the act of caring does not become naturally easier. When precariousness as the condition of social dependency is unequally divided into precarity, relationality is also stretched to the extremes. Ethics of care as a normative, ethical theory has long insisted on the centrality of relationships, whether between humans or between humans and non-humans. Relationality lies in not just intangible connections we form with another but in the tangible network of socially connected daily activities that sustain one’s existence as a human being to a large extent. As Carol Gilligan, one of the pioneers of ethics of care theory says, “the ideal of care is thus an activity of relationship, of seeing and responding to need, taking care of the world by sustaining the web of connection so that no one is left alone” (62).

Precarity and Caregiving in *Em and the Big Hoom* and *Yolk*

Precariousness as the general condition of vulnerability signals the need for relationality in our everyday ethics even in the absence of increasing precarity. However, with the specific conditions of precarity aggravated by neoliberal capitalism, governance and globalisation, relationality takes a toll. The caregivers of Jerry Pinto’s *Em and the Big Hoom* (2012) and

Mary HK Choi's *Yolk* (2021) both become the primary, or one of the primaries, caregivers to close family and the narrators of their experience. In this process of tending to a close one, time and again, they come face to face with moral conundrums which inhibit the act and process of caring. This paper acknowledges from the beginning that these two texts are vastly unlike when viewed in terms of location, context, and time and genre to some extent. While both texts are fictionalised or fictional accounts, the authors of both have mentioned how significant inputs have come from their own experiences of dealing with close ones in need of care. Pinto draws from his own experience of caring for his mother who had bipolar disorder and the knowledge he subsequently gains about mental health laws, pharmacology and more (Pinto *Readers Guide*). Choi's text on the other hand is an entirely fictional account of two sisters, one of whom has cancer and only has her sister to depend on in the fast-paced capital driven city of New York. Despite the book's fictional nature, Choi has been quoted saying,

while I was writing this book about healthcare and cancer, the pandemic happened and then my mother was diagnosed with lung cancer. There was so much grief in my heart and my body and so much longing for my mom that there were whole stretches that I couldn't work on it (Choi *Blue Willow Bookshop*).

With publishing dates also ranging almost a decade away from each other, what ties both texts are the central caregiver figure's negotiations with self, society, and relationship to a closed one throughout the caregiving process. Both texts are located or stem from time periods of significant socio-political and economic change. Pinto's text is set in late twentieth century India when the country had already been pushing towards economic liberalisation for almost four decades culminating in the reforms of 1991, a landmark event in independent India's history. While the text does not explicitly deal with this, the discourse around the economy, job market, middle-class savings, and lifestyle all depict a country expecting drastic change. One instance of this in the text is when the protagonist describes the "Chinese thela down the road" (Pinto 208), a fast-food joint which "had gone all swanky" (208). With increasing western influences on lifestyle, expenditure patterns and economic arrangements, even small business-like street-side shops can be seen acclimatizing to a newer client base and consumer driven economy. At the same time, we also see textual evidence wherein junior doctors in a government run hospital are quoted saying "This is a poor country with good topsoil. A poor country pays its people poorly. They can be bought and sold easily enough" (Pinto 156). Both these instances show the rapidly changing face of India as a consumer and labour-driven society from the late twentieth century onwards.

Yolk on the other hand, while set in a pre-pandemic New York, stems from the author's own experienced cultural milieu of a global pandemic which rendered numerous people and communities across the globe more precarious than ever before. Even if the text does not embody the specificities of pandemic induced precarity, it nonetheless shows the extremely tenuous nature of healthcare in the US which leaves a significant section of the population without any recourse to take when undergoing illness. June, the ailing elder sister in the novel, stealing her younger sister's identity to secure insurance when her own has lapsed exemplifies the precarious subject of contemporary American society. The fact that both her company and Obamacare fail June in her time of need goes on to show how populations, even those otherwise relatively comfortably placed, can almost immediately become disenfranchised. While June as a coloured person is already always precarious it is not until she quits her job that she comes to face her precarity. The movement from a general state of precariousness which can be maintained under the right conditions of dependency to a state of absolute helplessness has become the dangerous new normal for most people across

the world. June's is a case of what Standing describes as the precariat's lack of "rights-based state benefits, such as employment benefits, as well as private benefits gained from investments and contributory insurance plans" which results in a life lived "on the edge of unsustainable debt and in chronic economic uncertainty" (11).

In the same conversation when June and Jayne argue about the motivations and consequences of June's action is also a passing reference to their migrant parents and their approach to healthcare and insurance, "Mom and Dad's genius strategy is to wait to age into Medicare and fly to Korea for the big shit" (Choi 115). This is significant in the text's portrayal of migrant populations and how they view the US healthcare system as opposed to their native country. The parents in this case have the privilege to be able to go back to their country, South Korea, which has a robust public and private-funded healthcare system covering over ninety-six percent of the total population (Song 207). However, such privileges do not extend to all migrant populations, including children born in the US and under citizenship laws, permanent citizens of the country. Conditions are even more dire for those fleeing political persecution in their home countries. In such scenarios then, the gradual dismantling of welfare policies, especially those associated with health and the tedium of dealing with extremely complex paperwork in addition to going through multiple cycles of bureaucratic procedure makes it almost impossible to secure all assistance when it comes to health and care for the ailing.

While June's precarious existence is both because of her current ailment and unemployment because of the former, Jayne's is of a much different kind. She suffers from severe eating disorder, something Choi references from her own life (3), and seeks therapy for the same, goes to design school on state-assistance which is not enough to sustain a living in New York, and to be able to afford which she needs to put up in shabby apartments with abusive partners and housemates. She also has to work part-time to make ends meet and has gotten accustomed to shoplifting. She grapples with the uncertainty of graduation and entering the failing job market, all the while also being deeply conscious of growing up in America as an East Asian. Jayne's struggles with her identity, registering and accepting her Korean-ness directly affects her everyday interactions with close friends, family, and love interests. She is also the sole member of her family who bears the burden of seeing and knowing her mother abandoned the family in her childhood. Jayne's decision to not stop her mother in the past is directly associated with her own rootlessness. She notes how "Mom would always remark on how keen I was to leave" (Choi 70). Jayne struggles with holding onto parts of herself which she inhabits as the child of immigrant parents. Her complicated relationship with food is directly related to that of her relationship with her mother and her Asian-American identity. While she loves and appreciates the Korean culinary traditions that she inherits, she also quits eating a lot to be what she considers the most socially acceptable version of herself. Her eventual slipping into eating disorder to fit in with her classmates during high school, her distaste of meeting women who she believes to be far more accomplished than her and ultimately her long-drawn tense relation with her sister are all markers of her inability to assimilate into the society she has been born and brought up into.

However, this rootlessness is not just nostalgia for a place far away where one can find a sense of belonging. These are the ways in which racial and gendered precarity affect her everyday life and make sustenance a challenge. This condition is expressed poignantly when she talks of a recurrent dream in the months following her mother's departure wherein, she stands up to take Communion, climbing up a long flight of steep stairs while constantly worrying about falling only to reach the top and lay out her hands to be stung by a bee which then disembowels itself (Choi 211). Jayne's dream draws an almost perfect picture of her life

as a precarious subject taking every step with utmost caution threatened constantly with injury only to end up being injured because of forces entirely beyond her control. She epitomises the ethnic minority who, as Guy Standing says, “feel they are denied a sense of home, a viable present [...] keep their heads down and put up with insecurity, concentrating on survival” (11). In the current timeline of the text, Jayne struggles to even take the decision to be her sister’s caregiver because of the way the two sisters have been drawn apart. While this might seem to stem from their personal differences, it is also a function of their individual negotiations with their socio-political milieu. Upon hearing of June’s sickness, Jayne immediately experiences an anxiety and panic attack and is ready to accept the worst fate for her sister, death. She also eagerly wants to leave. However, a narrative intervention at this point comes in the form of a old lady who collects trash and asks the sisters for directions to Columbus Circle. The lady’s presence at that point in the text sets up a conversation for the two sisters for the first time in a long time while also reminding Jayne that she needs to talk to her own parents, especially her mother. The old lady whose subway destination becomes a point of departure for a conversation on race and racism also stands as a metaphor for what lack of adequate social policy and political action can do to people, especially those from already disenfranchised backgrounds. Her presence in the text at that point marks a moment of recognition for the two sisters who realise the importance of having someone to care for us. This is one of the first instances in the text when relationality as a necessity in human relations can be argued for. However, caring for her sister, once the decision has been made, isn’t the simplest task. While it might seem like a simple sacrifice on Jayne’s part to hand over her insurance and in turn her entire identity to June for treatment, for Jayne this proves to be an immense sacrifice, one that she would not necessarily have to make if the environment around them was conducive for June to receive treatment without insurance complications. As Vrinda Dalmiya says, the “entanglement of vulnerability and precarity in the context of globalization resurrects older concerns about the troubled relationship of care to class and race and its extension outside domains of intimacy” (69). Dalmiya asserts this in terms of the specific case of migrant care workers who give up their own lives in their home countries to search for better economic opportunities in the first world thereby bringing about a newer kind of unequal dynamics of racial and class relations in the era of globalisation.

While the family in the text do not move to the US as migrant workers, their move is not the most comfortable. There is no guaranteed assurance of a good life already set aside for them. As Jayne’s mother describes their sixteen-hour workdays she also says how she felt it was “a mistake to choose this life and that I’d brought you girls into it, which was unforgivable” (Choi 350). This vulnerability that Jayne’s mother faces as an immigrant in a nation where life is guided by extreme working conditions and an inability to give her children all that she wants to is passed down to her children to some extent. Jayne’s fragile sense of identity is located within her doubts as to her place in her family’s life. This results in the failure of relationality that we see the two sisters embody throughout. Jayne cannot look after June without feeling a sense of loss of herself while at the same time guilt at being not able to do more for her sister. The entirety of the text spans a short period of time before June steps into surgery. Jayne in a way does not really begin her caregiving journey but the text becomes a dialogical engagement with the complications of wanting to be one and failing multiple times. There are instances in the text when Jayne compares her own diagnosis of anxiety and depression with June’s cancer diagnosis. She says,

“I’m jealous of June’s cancer. There’s such powerful recognition in the diagnosis. [...] Being sick with cancer would explain my sadness, my sickness, my anxiety, and the horrible suspicion that everyone in the world was born with a user’s manual or a guide to personal happiness but me” (Choi 319).

This is one of the most evocative statements of her trying to grasp her place as a caregiver when she herself lacks the ability to care for herself. Her recurring disappointments with her therapist also point towards systems which fail individuals. Both Jayne as caregiver and June as care-receiver end up having to bear the responsibility and burden of care themselves. Even at the end when June is receiving surgery, their mother reminds Jayne of how in the future if she were to have children, she would have to do it as June simply because their insurance would not allow otherwise. This shows how care has been made into a personal responsibility to be fulfilled within the limits of one's ability. Ability in such cases almost always equals economic or physical ability indirectly meaning that only those who can afford to monetarily and physically take care of close ones are truly capable of survival. Those who fail to do so impede the rate of so-called progress and development and are consequently disposed outside the accepted frames of recognition. Their lives and the enabling conditions needed for their survival are taken out of purview of state policies and political action. As Joan Tronto says, "Within the framework of neoliberalism itself, the failures (to care) are understood as individual failures, not as a collective responsibility or failure" (30).

The precarity that characterises the two generations in *Yolk* and challenges the act of caring finds resonance in Pinto's novel *Em and the Big Hoom* in more ways than one. The titular character Em, the narrator-protagonist's mother, suffers from a debilitating mental health condition which seems to have begun after the birth of her second child, the narrator. The precariousness of Em's condition and the consequent precarity that Em and her children face begins much before them as seen evidently within the world of the novel itself. Before Em was herself a care-receiver, she was also a caregiver to her young and new-born children. One of the first instances in the book when we see Em talking explicitly about her condition to her now adult son is when he asks her in Ward thirty-three of the hospital what could possibly be the reasons for her doing what she did, in this case another attempt at killing herself. Em describes the sadness that engulfs her like a tap dripping dark oil or molasses which have no outlet to drain (Pinto 19). She describes herself feeling like she is drowning in it but puts up with it until she feels that it will also drown her children, which is when she first attempts at ending her life. The vulnerability of her own mind seeps into her capacities of caring for her children. This is like how June and Jayne's mother's need to escape her family for some time forms an intergenerational bond of passing on a certain vulnerability which makes caring even more difficult within the already limiting structures of society and governance that subjects must adhere to. This points towards the idea that care is part of a shared social structure and needs to be passed on organically through bonds of caring forming a social safety net for the most vulnerable. Nel Noddings in her seminal work *Caring* argues towards a similar end wherein she proposes that, "human caring and the memory of caring and being cared for [...] form the foundation of ethical response" (22). Human beings can only respond ethically to a vulnerable other when they are governed by an ethics which has care at the center of it.

The text despite being an attempt by the narrator-caregiver son to find out why Em is the way she is, never really succeeds in doing so. The precarity that characterises Em's adult life also seeps into her children and can only be understood as a condition of her illness. While in the present it is Em's condition that makes her a precarious subject, the text also reveals her upbringing in a lower-middle class family who had to migrate from Burma and spend long durations without proper housing and sanitation facilities. Additionally, Em is also shown to have never really made choices for herself. Raised in conditions of economic hardship and as a part of an ethnic minority, Em's precarity precedes her present. As Eva Feder Kittay says in her essay cited previously, "economic precarity is a multiplier when other forms of precariousness pose dangers" (298). This extends to both Em and her son who

are riddled by multiple factors that heighten precarity. Beyond this, we are also given glimpses into Em's precarious negotiations with motherhood. She speaks of her multiple forcibly induced operations while at the same time cautioning her children against it. On motherhood she says, "but motherhood...you're given something totally dependent, totally in love with you and it doesn't seem to come with a manual" (Pinto 49). However, this does not mean that Em or the mother in *Yolk* are bad mothers because they have been unable to provide a certain amount of care to their children. Rather it is their own precarity which renders them incapable of providing consistent care. If a natural caring instinct must be developed as Noddings postulates, one must have circumstances where caring is possible in the first place. Precarity then becomes one of the primary hinderances to caring.

Whilst it is unknown as to whether Em's upbringing has any direct influence on her condition, the effect of a life lived in precarity cannot be discounted. Furthermore, earlier scholarship which has studied the text as a trauma narrative has pointed towards dysfunctional family dynamics in Em's family and how that results in "idiosyncratic communication patterns that pose challenges for others in terms of understanding" (Sinha & Ali 1409). It is this lack of understanding their mother's condition that becomes one of the primary reasons for distress the protagonist and his sister face as her caregivers. Their extreme closeness to each other in the small one-bedroom flat in Bombay ensures that every interaction has a heightened impact on all parties involved and conclusions are usually messy ending with someone making a cup of tea. Underlying this chaos is the protagonist's fear of becoming the same way as his mother which is something Pinto himself has also described to have experienced as a caregiver to his mother (Pinto 2014). This fear is also laced with his guilt about wanting to be rid of his mother and that perhaps he would find peace if his mother passed away (Pinto 55). The intrusive nature of his thoughts however cannot be argued as selfishness. Rather these are the consequences of a social order wherein the caregiver's immediate socio-political and economic environment are not conducive to providing care. As Butler points out, "sustaining conditions are both our political responsibility and the matter of our most vexed ethical decisions" (23).

For caregivers to be able to provide adequate care their social environment must ensure that they "are not depleted, exploited or dominated as a consequence of caring for another" (Kittay 308). However, conditions like the ones facing the protagonist - of long and inconsistent working hours, lack of space and resources to rest, lack of public healthcare services, unaddressed fears of biological precarity and a rapidly changing urban socio-economic milieu - all contribute towards a scenario where the inevitable dependence on family for care is easily translated to caregivers' burden. The protagonist of Pinto's text forms a part of the third group of the precariat as formulated by Standing. This is the group which is educated and believes in a progressive politics of equality, freedom, and sustainability. This is reflected in his self-identification as a marxist and acts like participation in rallies. As the protagonist says his only asset remains the fact of his not being mad. Furthermore, he says, "Growing up, I knew I did not have many advantages. I had no social skills [...] no friends. I had no home- no home that was a refuge" (Pinto 55). These expressed conditions of lack are a direct indication of the kind of precarious existence people are forced to live through despite them having the required qualifications in terms of education and career to be able to live a comfortable life.

Vulnerabilities because of a precarious position are often expressed in the form of fear. Sometimes it is the fear of the Big Hoom's death which would leave the protagonist as the sole caregiver for his mother, other times it is the fear of undergoing the same himself or his sister suffering through something similar. Ideally, precariousness such as this should be

met with a societal net that ensures rehabilitation for those who need it the most. While an ethics of care argues for relationality to achieve this goal, present conditions of precarity brought on by neoliberalism inhibit that. This results in caregivers undergoing a crisis of not just identity but also morals. While care does not have to be a personal burden, the inability to provide it in any circumstance leads to what has now been termed moral injury which is basically the idea that when caregivers are unable to provide the care, they know the receivers need because of factors completely beyond their control, they suffer a drastic blow to their self-assured ideas of morality. As Sarah Clark Miller says,

“... beyond exhaustion and burnout, what caregivers risk losing when they endure forms of moral injury under neoliberalism is their ability to uphold their own sense of morality (which) [...] amounts to the risk of losing their very sense of identity as caring individuals” (57).

Taking this further I argue that in dealing with this crisis of morality, literature and writing act as an alleviating medium through which caregivers can look for meaning in the process. However, to claim that literature acts as an alleviating medium does not imply that it provides for solutions to societal problems of unequally experienced precarity and a crisis of caregiving. Literature only does so much to generate a discursive framework around these issues which can have tremendous influence on public opinion and consequently policy making. For instance, the protagonist of *Em and the Big Hoom* attempts at negotiating with his fears, love, guilt and burden through multiple registers. One such significant register is that of faith. He undergoes a crisis of faith when he realises that not even God could adequately address his problems. He says, “no one could offer any explanation for the suffering I watched my mother go through. Nothing I read or heard fitted with the notion of a compassionate God” (Pinto 62). This search for an external solution to his problems is also indicative of the helplessness and moral precarity, in Miller’s terms that caregivers have to deal with. Hence it is also a search for meaning. The narratorial strategy of both *Yolk* and *Em and the Big Hoom* follow a direct dialogue based present continuous narrative and we as readers see events happen as the narrators relay them to us. However, the latter text allows for focalisation on various forms of recording and writing including the present text at hand. Whether it is Em’s letters or the protagonist’s relentless recording of his mother’s words, the text goes back to the idea of knowing, of finding out more details and remembering them. There is also a significant amount of dialogue and deliberation, both with Em and about her. The protagonist at one-point wonders if Em’s letters were perhaps manifestations of her condition while also crediting the effortlessness of her writing. The text’s dialogue heavy nature is also significant in this regard because perhaps the protagonist through conversations with Em tries to fill the lack in caregiving that he perceives in himself. Because there is nothing much, he can physically do for her, he engages in conversations to know more about his mother. This takes us back to Butler and Levinas and the idea of precariousness as a necessary condition for discourse. It is because people are precarious and dependent on others that they engage with them and from within which discourse can arise. Literature in this manner becomes the medium through which multiple such others can be engaged and brought to take part in the construction of a social order which is generative and sustaining towards everyone equally.

Conclusion

In any discussion on care, the importance of certain emotions and affect cannot be omitted. While it is beyond the scope of this paper to deal with it in detail, as a way of concluding and

going back to the very title of this paper, I will briefly look at the idea of empathy that a caregiving subject has to cope with. Ironically, in both the textual instances of the usage of this word ‘empathy’ the caregiver’s engagement with it is not in the correct sense of the word meaning the ability to understand another’s feelings. It is on the other hand evoked as a concept in negation. In *Yolk*, June brings it up in rhetoric in a fit of rage asking Jayne, “Empathy? Ever heard of it? If you could just think of someone else for one second” (Choi 185). Evoked as rhetorical strategy, the otherwise organic nature of the feeling is discounted in its deliverance almost as a desperate plea for help. In *Em and the Big Hoom* the protagonist conjures up the phrase, “this spared me the phenomenal expense of empathy” (Pinto 162) when deliberating upon whether Em’s episodes were caused by her condition or if they were merely acts of pretense to get away from work. While he does conclude that the truth is otherwise and Em really is suffering, the fact remains that empathy is evoked here as well as a sort of negation, an act not done completely. Herein I argue that this negated empathy, empathy which is not directed naturally towards the ailing other is part of the larger crisis of care. It does not signify the absence of care or an unwillingness to care but rather exposes the deliberately manufactured conditions under which such negations come into being. This is in lieu with what Butler says about the impossibility of representation. They draw from Levinas and say, “the human is indirectly affirmed in the very disjunction that makes representation impossible, and this disjunction is conveyed in the impossible representation” (144). A negation of empathy signifies collapsing structures of relationality. While this is in no way a personal burden for any one caregiver to bear, it signifies a dangerous shift towards even more rapidly collapsing social security nets for the most vulnerable groups. The moral injury that accompanies such change could generate larger crises of ethics, discourse, and the very fundamental principles of justice. Even though the expense of empathy may be phenomenal, as rational, social, and caring beings, humans owe it to one another and to non-human entities around them to slow down these degrading processes to move forward on more equal and sustainable terms.

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Bionote

Abhilasha Roy is a PhD Research Scholar in the Department of English, University of Delhi. She has done her Bachelors in English from the University of Delhi and Masters in English from Jawaharlal Nehru University, New Delhi. Her PhD thesis is aimed at studying contemporary narratives and literary depictions of caregiving. She has previously written her Masters dissertation on the literature of the Chinese-Indian community. She also holds language proficiency certificates in Korean language from the King Sejong Institute Foundation. Her research interests include diaspora literatures, culture industries, popular culture in South-east and East Asia, and contemporary coming-of-age fiction. She can be reached at abhilasharoy17@yahoo.com.

ORCID ID: <https://orcid.org/0009-0000-7636-2612>

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